

**SOUTH CAROLINA
GENERAL SERVICES DIVISION/SURPLUS PROPERTY
FEDERAL/STATE SURPLUS PROPERTY PROGRAM
1441 Boston Avenue, West Columbia, SC 29170
(803) 896-6880
(803) 822-1760**

APPLICATION FOR ELIGIBILITY

Mail, email or fax completed original application along with all required documentation to:

Mail: SC Surplus Property, 1441 Boston Ave, West Columbia, SC 29170

Email to: Carol.Jeffcoat@admin.sc.gov

Fax to: 803-822-1760

Please note:

Approval/Disapproval of application with required documentation can take up 30 or more days for review.

Incomplete applications will not be processed.

Service Charges apply for all Property.

Payment in Name of Organization by Check or Credit Card no Cash/Money Order accepted.

Non-profit/tax exempt organizations are not always eligible to qualify for this program. Only certain nonprofit/tax exempt organizations are eligible. An organization must provide an accredited education service (school, including non-profit/tax exempt daycares) or be a licensed health facility (clinic, hospital, etc.).

All donees must reapply every three (3) years or earlier as deemed necessary. To reapply, a donee must submit a completed updated application which will be mailed to you approximately 90 days prior to expiration, along with all required documentation.

PAGE LEFT BLANK

INSTRUCTIONS

SECTION I: Provide the Federal Identification Tax number of your organization and the full legal name of your organization on the first line of this section. Provide the name of the chief executive officer of the organization and telephone number, at which s/he may be reached, along with your fax number, if you have one. Complete the mailing address of your organization as recognized by the US Postal Service, including the zip code. Provide the street address if different from the mailing address or provide directions if located on a rural route or other remote area. List the county in which the organization is actually located and a business telephone number with area code. Also, please include your e-mail address, if applicable.

SECTION II: Check the appropriate box, which describes your organization. If you are unable to determine which status to check, please contact our office for assistance or refer to the definitions attached.

SECTION III: Check the appropriate box (es), as many as apply, which indicate the type or purpose of your organization. Definitions have been provided to assist in making this determination.

SECTION IV: *Please submit the following on your letterhead.* A comprehensive written description of all programs or services provided is required. A description of the operational facilities should also be included. Be sure to include information on staff and staff qualifications, hours of operation, services and programs offered, population or enrollment, fees charged, etc. Include samples of pamphlets, catalogs, brochures and posters. If incorporated, include a complete copy of Articles of Incorporation with all filing certificates and amendments, and a copy of your current By-Laws. If your organization is an authority, please include a reference of the Act of Law under which you were created. If a volunteer fire or rescue company, please include a written resolution or agreement with your municipality stating that they provide your organization with funding and recognize you as an integral part of their public safety or health program.

If your organization is a provider of assistance to the homeless or impoverished, please submit a detailed narrative description of your program, services or activities, including your hours of operation and proof population served is homeless or below poverty level. If you are operating primarily as a food bank or a soup kitchen, include a statement certifying that a majority of the individuals you serve are homeless. If you are operating primarily as a shelter, indicate how many individuals you serve on an annual basis. Also, submit evidence from a local elected official that your organization is a publicly recognized provider of assistance to the homeless or impoverished. Evidence can take the form of a letter or statement from the chief elected official, such as the president or chairman of your township's board supervisors or the mayor, or a letter or statement from a local public organization such as the Welfare Office or Social Security. Provide details of a system to account for federal surplus property of a personal nature as clothing, shoes, toiletries and other such items that would be issued to homeless or impoverished individuals.

SECTION V: Check the appropriate box, which indicates the organization's source of funding. Supporting documentation indicating the types and amounts of funding must be submitted with the completed application.

SECTION VI: All applicants making application as "nonprofit, tax-exempt organizations" must provide a copy of the IRS determination letter indicating tax exemption under Section 501 of the IRS Code of 1954. The name of the organization on this IRS letter must match the name provided in Section I of this application. If not, include sufficient evidence such as amendments to Articles of Incorporation or Assumed Name filing certificates to establish an "audit trail" of names showing the legal corrections.

SECTION VII: All applicants making application, as "nonprofit, tax-exempt organizations" are required to submit evidence that the applicant is currently approved, accredited or licensed. Programs for older individuals must include evidence of funding under the Older Americans Act of 1965; Titles IV or XX of the Social Security Act; Title VII and X of the Economic Development Act of 1964; or the Community Service Block Grant Act.

AUTHORIZED REPRESENTATIVES: The CEO designates individuals to be responsible to acquire Federal Surplus Property, obligate necessary funds for this purpose and execute Distribution Documents agreeing to terms and conditions, reservations and restrictions applying to property obtained through the agency. Names and titles must be completed with each individual's signature.

SIGNATURE/DATE: Annotate the date and provide an original signature of applicant's chief executive officer (President, Chairman of the Board, Mayor, Executive Director, etc.). Photocopied, rubber stamped, machine produced, carbon or other facsimile type signatures are not acceptable.

DEFINITIONS

ACCREDITED: Approved by a recognized accrediting board/association on a regional, state or national level.

ADULT DAY CARE: A program of services provided under health leadership in an ambulatory care setting for adults who do not require 24-hour institutional care and yet, due to physical and/or mental impairment, are not capable of full time independent living. Participants in the day care program are referred to the program by their attending physician or by some other appropriate source such as an institutional discharge planning program or welfare agency, etc. The essential elements of a day care program are directed toward meeting the health and maintenance and restorative needs of participants.

APPROVED: Recognition and approval by the State Department of Education, State Department of Health, and other appropriate authority exists for the purpose of making an accreditation. For an education institution or educational program, approval must relate to academic or instructional standards established by the appropriate authority. An educational institution or program may be considered approved if its instruction and credits are accepted by three accredited or state-approved institutions, or if it meets the academic or instructional standards prescribed for public schools in the state, i.e., the organizational entity or program is devoted primarily to approved academic, vocational (including technical or occupational) or professional study and instruction, which is operating primarily for educational purposes by a full-time staff of qualified instructors. For a public health institution or program, approval must relate to the medical requirements and standards for the professional and technical services of the institution established by the appropriate authority. A health institution or program may be considered approved when a state body having authority under law to establish standards and requirements for public health institutions renders approval thereto whether by accreditation procedures or licensing or such other methods prescribed by state law. In the absence of an official state approving authority for a public health institution program or education institution or program, the awarding of research grants to the institution or organization by a recognized authority may constitute approval.

CHILD CARE CENTER: A public or nonprofit facility where educational, social, health and nutritional services are provided to children through age 14 or as prescribed by state law, and which is approved or licensed by the state or other appropriate authority as a child day care center.

CLINIC: An approved public or nonprofit facility organized and operated for the primary purpose of providing outpatient public health services.

COLLEGE: An approved or accredited public or nonprofit institution of higher learning offering organized study courses and credits leading to baccalaureate or higher degree.

ECONOMIC DEVELOPMENT: A program carried out or promoted by a public agency for public purposes which involves, directly or indirectly, efforts to improve the opportunities of a given political area for the successful establishment or expansion of industrial, commercial or agricultural plants or facilities and which otherwise assists the creation of long term employment opportunities in the area or primarily benefits the unemployed or those with low incomes.

EDUCATIONAL INSTITUTION: An approved, accredited or licensed public or nonprofit institution, facility, entity or organization conducting educational programs.

EDUCATIONAL RADIO STATION: A radio station licensed by the Federal Communications Commission and operated exclusively for noncommercial educational purposes and which is public or nonprofit and tax-exempt under Section 501 of the Internal Revenue Code of 1954.

EDUCATIONAL TELEVISION STATION: A television station licensed by the Federal Communications Commission and operated exclusively for noncommercial educational purposes and which is public or nonprofit and tax-exempt under Section 501 of the Internal Revenue Code of 1954.

FEDERAL FINANCIAL ASSISTANCE: Aid provided by a federal agency in the form of grants, contracts, cooperative agreements, loans, loan guarantees, property, interest subsidies, insurance or direct appropriations, not including direct federal cash assistance to individuals. It includes awards received directly from federal agencies or indirectly through other units of state and local government.

HEALTH CENTER: An approved public or nonprofit facility utilized by a health unit for the provision of public health services.

HOSPITAL: An approved or accredited public or nonprofit institution providing public health services primarily inpatient medical or surgical care of the sick and injured, including related facilities such as laboratories, outpatient departments, training facilities and staff offices.

LIBRARY: A public or nonprofit facility providing library services free to all residents of a community, district, state, or region.

LICENSED: Recognition and approval by the appropriate state or local authority approving institutions programs in specialized areas. Licensing generally relates to established minimum public standards of safety, sanitation, staffing and equipment as they relate to the construction, maintenance and operation of a health or educational facility, rather than to the academic, instructional or medical standards for these institutions. License may be required for educational or public health programs such as occupational training, physical or mental health rehabilitation services or nursing care. Licenses must be renewed periodically.

LOCAL GOVERNMENT: A government or administration of a locality within a state or possession of the US.

MEDICAL INSTITUTION: An approved, accredited or licensed public or nonprofit institution, facility, entity or organization the primary function of which is the furnishing of public health and medical services to the public demonstrations related to cause, prevention and methods of diagnosis and treatment of diseases and injuries. This term includes but is not limited to hospitals, clinics, alcoholic and drug abuse treatment centers, public health treatment centers, research and health centers, geriatric centers, laboratories, medical schools, nursing schools and similar institutions. The term does not include institutions primarily engaged in domiciliary care, although separate medical facility within such a domiciliary institution may qualify as a "medical institution".

MUSEUM: A public or private nonprofit institution which is organized on a permanent basis essentially for educational or esthetic purposes and which, using a professional staff, owns or uses tangible objects, whether animate or inanimate; cares for these objects; and exhibits them to the public on a regular basis (a minimum of 1000 hours) either free or for a nominal charge. The term "museum" includes, but is not limited to, the following institutions, if they satisfy all other provisions of federal regulations: aquariums and zoological parks, botanical gardens and arboretums, museums relating to art, history, natural history, science and technology and planetariums. An institution uses a professional staff, if it employs at least one full time qualified staff member who devotes his or her time primarily to the acquisition, care or public exhibition of objects owned or used by the institution. This definition does not include any institution, which exhibits objects to the public if the display or use of the objects is not incidental to the primary function of the institution.

NONPROFIT TAX-EXEMPT ACTIVITY: An institution or organization, no part of the net earnings of which inures or may lawfully inure to the benefit of any private shareholder or individual, and which has been held to be tax-exempt under the provisions of Section 501 of the Internal Revenue Code of 1954.

PROGRAM FOR OLDER INDIVIDUALS: Any state or local government agency or any nonprofit, tax-exempt activity which received funds appropriated for programs for older individuals under the Older Americans Act of 1965 as amended, under Titles IV and XX of the Social Security Act, or under Titles VIII and X of the Economic Opportunity Act of 1964 and the Community Services Block Grant Act.

PROVIDER OF ASSISTANCE TO THE HOMELESS: A public agency or a nonprofit, tax-exempt institution or organization that operates a program which provides assistance such as food, shelter or other services directly to homeless individuals. The term "homeless individual" means an individual who lacks a fixed, regular adequate nighttime residence, or who has a primary nighttime residence that is (1) a supervised public or private operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelter and traditional housing for the mentally ill); (2) an institution that provides a temporary residence for individuals intended to be institutionalized; or (3) a public or private place not designed for, or ordinarily not used as a regular sleeping accommodation for human beings. For purposes of this regulation, the term does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or state law. Property acquired through a donation program by such institutions or organizations must be used primarily in their program for providing assistance to homeless individuals.

PROVIDER OF ASSISTANCE TO IMPOVERISHED FAMILIES AND INDIVIDUALS: A public or private nonprofit, tax-exempt organization whose primary function is to provide money, goods or services to families or individuals whose annual incomes are below the poverty line as defined in Section 673 of the Community Service Block Grant Act (42 U.S.C. 9902). Providers include food banks, self-help housing groups and organizations providing services such as the following: health care; medical transportation; scholarships and tuition assistance; tutoring and literacy instruction; job training and placement; employment counseling; child care assistance; meals or other nutritional support; clothing distribution; home construction or repairs; utility or rental assistance and legal counsel.

PUBLIC AGENCY: Any state, political subdivision thereof (including any unit of local government or economic development district) or any department, agency, instrumentality, thereof (including instrumentalities created by compact or other agreement between states or political subdivisions), or any Indian Tribe, band, group, pueblo community located on a state reservation.

PUBLIC HEALTH INSTITUTION: An approved, accredited or licensed public or nonprofit institution, facility or organization conducting a public health program such as a hospital, clinic, health center or medical institution including research for any such program, the services of which are available to the public at large.

PUBLIC PURPOSE: A program or programs carried out by a public agency which are legally authorized in accordance with the laws of the state or political subdivision thereof and for which public funds may be expended. Public purposes include but are not limited to programs such as conservation, economic development, educational parks and recreation, public health and public safety.

PUBLIC SAFETY: A program or programs carried out or promoted by a public agency for public purposes involving directly or indirectly the protection, safety, law enforcement activities and criminal justice system of a given political area. Public safety programs may include but are not limited to those carried out by public police departments, sheriff's offices, the courts, penal and correctional institutions including juvenile facilities, state and civil defense organizations, fire departments and rescue squads, including volunteer fire departments and rescue squads supported in whole or in part with public funds.

SBA – SMALL BUSINESS ADMINISTRATION: Certified thru the SBA office. Additional forms required please contact SC State Surplus Property Office at 803-896-6880 for the forms.

SCHOOL: A public or nonprofit approved or accredited organizational entity devoted primarily to approved academic, vocational or professional study and instruction which operates primarily for educational purposes on a full-time basis for a minimum school year and employs a full-time staff of qualified instructors.

SERVICE EDUCATIONAL ACTIVITY (SEA): Any educational activity designated by the Secretary of Defense as being of special interest to the armed services. The term includes maritime academies; or military, naval, Air Force or Coast Guard preparatory schools; junior colleges and institutes; senior high school-hosted Junior Reserve Officer Training Corps; and nationally organized youth groups such as Boy Scouts, Girl Scouts and Little League whose primary purpose is to offer courses of instruction devoted to the military arts and sciences.

UNIVERSITY: A public or nonprofit approved or accredited institution for instruction and study in the higher branches of learning and empowered to confer degrees in special departments or colleges.

VETERANS ORGANIZATION: Organizations eligible to receive Federal surplus property for purposes of providing services to veterans under 40 U.S.C. 549(c)(3)(C). Eligible veterans organizations are those whose (1) membership comprises substantially veterans (as defined under 38 U.S.C 101); and (2) representatives are recognized by the Secretary of Veterans Affairs under 38 U.S.C. 5902.

**SOUTH CAROLINA
FEDERAL/STATE SURPLUS PROPERTY PROGRAM**
1441 Boston Avenue, West Columbia, SC 29170
803-896-6880
803-822-1760 (Fax)

APPLICATION FOR ELIGIBILITY

I. LEGAL NAME & MAILING ADDRESS OF APPLICANT'S ORGANIZATION:

Name of Organization

Federal ID Number

Name of Executive Director of Organization

Mailing Contact

Mailing Address (PO Box Number, Street, City & State)

Zip Code

Street Address (If Different From Mailing Address)

E-Mail Address

() _____
Cell phone number

County

() _____
Telephone #

() _____
Fax #

II. APPLICANT STATUS: (Check one)

☐ Public Agency, including Public School
(evidence must be provided)

☐ Nonprofit, Tax-Exempt Organization
(IRS 501c3 evidence must be provided)

☐ Veterans Organization

☐ SBA 8A Certified thru the Small Business Administration
(additional forms required – call the office for forms)

**Public Agency: State Agency, City, Town, County, Municipality only complete the following pages:
7 (I, II & III), 8 (signature and Payment Information), 9 (all columns), 11 (complete page),
Page 13 (signature)**

Nonprofit: Answer all questions, signatures and submit required documentation

III. TYPE OR PURPOSE OF ORGANIZATION: (MUST CHOOSE FROM THE LISTING BELOW)

- | | | |
|--------------------------------------------|-----------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> State | <input type="checkbox"/> School District | <input type="checkbox"/> Hospital |
| <input type="checkbox"/> County | <input type="checkbox"/> College/University | <input type="checkbox"/> Health Center |
| <input type="checkbox"/> City | <input type="checkbox"/> Vocational, Technical or Trade School | <input type="checkbox"/> Clinic |
| <input type="checkbox"/> Township | <input type="checkbox"/> School for the Handicapped | <input type="checkbox"/> Service Educational Activity: |
| <input type="checkbox"/> Borough | <input type="checkbox"/> Sheltered Workshop | <input type="checkbox"/> Boy Scouts |
| <input type="checkbox"/> Authority | <input type="checkbox"/> Programs for Older Individuals | <input type="checkbox"/> Girl Scouts |
| <input type="checkbox"/> Police Department | <input type="checkbox"/> Provider of Assistance to Homeless | <input type="checkbox"/> Little League |
| <input type="checkbox"/> Fire Company | <input type="checkbox"/> Provider of Assistance to Impoverished Individuals | <input type="checkbox"/> Young Marines |
| <input type="checkbox"/> Ambulance Service | <input type="checkbox"/> Child Care Center | <input type="checkbox"/> Small Business – 8 a certified |
| <input type="checkbox"/> Museum | <input type="checkbox"/> Nursing Home | thru the Small Business |
| <input type="checkbox"/> Radio/TV Station | <input type="checkbox"/> Medical Institution | Administration |
| <input type="checkbox"/> Library | <input type="checkbox"/> Veterans Group | |

**IV. PROVIDE A WRITTEN DESCRIPTION OF PROGRAMS OR SERVICES OFFERED,
INCLUDING A DESCRIPTION OF FACILITIES OPERATED. (provide on letterhead)**

V. SOURCE OF FUNDING: (Attach Supporting Documentation)

☐ Tax Supported ☐ Grant ☐ Contributions ☐ Other _____
(Specify)

VI. HAS THE ORGANIZATION BEEN DETERMINED TO BE TAX EXEMPT UNDER SECTION 501 OF THE INTERNAL REVENUE CODE OF 1954?

☐ Yes (copy required except for governmental units) ☐ No

VII. IS THE ORGANIZATION APPROVED, ACCREDITED, OR LICENSED?

☐ Yes (copy required) ☐ No

NON-DISCRIMINATION CERTIFICATON

The "donee" hereby agrees that the program for or in connection with which any property is donated will be conducted in compliance with, and the donee will comply with and will require any other person (any legal entity) who, through contractual or other arrangements with the donee, is authorized to provide services or benefits under said program to comply with, all requirements imposed by or pursuant to the regulations of the General Services Administration (41 CFR 101-6.2) issued under the provisions of Title VI of the Civil Rights Act of 1964, Section 606 of Title VI of the Federal Property and Administrative Services Act of 1949, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, Title IX of the Education Amendments of 1972, as amended and Section 303 of the Age Discrimination Act of 1975, to the end that no person in the United States shall, on the ground of race, color, national origin, sex or age, or that no otherwise qualified handicapped person shall solely by reason of the handicap, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity for which the donee received Federal assistance from the General Services Administration, and hereby gives assurance that it will immediately take any measure necessary to effectuate this agreement.

The donee further agrees that this agreement shall be subject in all respects to the provisions of said regulations, that this agreement shall obligate the donee for the period during which it retains ownership or possession of any such property, that the United States shall have the right to seek judicial enforcement of this agreement, and this agreement shall be binding upon any successor in interest of the donee and the word "donee" as used herein includes any such successor in interest.

Signature of Chief Administrator

Date

PAYMENT INFORMATION

Payment is due 30 days from the invoice date. Payment for property must be in the form of a check drawn on the account of your organization or credit card in organization name (name of organization must be on credit card) (id of person presenting credit card is required and must match name on card). SC State Agencies can process IDT's.

For new accounts for non-profit organizations, payment required 6 times before invoicing can be approved.

Any Suspended Accounts re-established payment may be required 6 times before invoicing can resume.

ALL applicant organizations must provide a Payment Point of Contact who will receive notices regarding overdue payments.

Name: _____ Title: _____

Email: _____ Phone: _____

Organizational Name _____

AUTHORIZED REPRESENTATIVES

- I. An "Authorized Representative" is a person authorized to sign for the release of property, obligate necessary funds for this purpose and Execute Distribution Documents agreeing to the terms, conditions, reservations and restrictions applying to property obtained through the agency on your organization's behalf.
An Authorized Representative must sign in the "Signature" provided space below to sign for the release of property.
- II. All representatives listed in any prior applications or account updates will be deleted from the account.

Complete each column – names must be legible – signature must be in BLUE INK.

Name (Print)	Title	Signature	E-mail Address	Phone

PAGE LEFT BLANK

DONEE FEEDBACK & PROPERTY REQUEST LIST

Donee Organization Name: _____ **Donee #** _____

Contact Person: _____ **Phone Number:** _____

How did you hear about us?

- ☐ Co-worker ☐ From another similar organization ☐ Email broadcast
☐ At an event (please specify): _____
☐ Other (please explain): _____

How do you prefer to obtain Federal Surplus Property?

- ☐ Looking at the "New Arrivals & Specials" email broadcasts
☐ Browsing our online inventory
☐ In-person at the warehouse

What attracted you to using the Federal/State Surplus Property program (when compared to buying brand new)? (check as many as you like)

- ☐ Low fees
☐ Variety/Type of Items Available
☐ Convenience/Quicker process compared to your organization's traditional purchasing process Only option due to limited budget
☐ Level of Customer Service/Past Positive Experience with Federal Surplus Property
☐ Program Ability to submit requests
☐ Other (please explain) _____

***What item(s) is your organization in need of?**

- | | | |
|-------------------------------------------|------------------------------------------------|-----------------------------------|
| <input type="checkbox"/> Office furniture | <input type="checkbox"/> Kitchen Equipment | <input type="checkbox"/> Tools |
| <input type="checkbox"/> Vehicles | <input type="checkbox"/> Maintenance Equipment | <input type="checkbox"/> Forklift |
| <input type="checkbox"/> Generator | <input type="checkbox"/> Medical Equipment | <input type="checkbox"/> Other |

*** Required**

Return Completed application with required documentations to:

Mail to: Surplus Property, ATTN: Eligibility, 1441 Boston Ave,
West Columbia, SC 29170

Email to: Carol.Jeffcoat@admin.sc.gov

Fax to: 803-822-1760

ACKNOWLEDGEMENTS

(A) THE DONEE CERTIFIES THAT:

- (1) It is a public agency or a nonprofit institution or organization exempt from taxation under Section 501 of the Internal Revenue Code of 1954 within the meaning of Section 203 (j) of the Federal Property and Administrative Services Act of 1949, as amended and/or the regulations of the General Services Administration (GSA).**
- (2) If a public agency, the property is needed and will be used by the recipient for carrying out or promoting the residents of a given political area one or more public purposes, or, if a nonprofit, tax-exempt institution or organization, the property is needed for and will be used by the recipient for educational or public health purposes, including research for any such purpose, or for programs for older individuals. The property is not being acquired for any other use or purpose, or for sale or other distribution, or for permanent use outside the State, except with prior written approval of the State agency.**
- (3) Funds are available to pay all costs and charges incident to donation.**
- (4) This transaction shall be subject to the nondiscrimination regulations governing the donation of surplus personal property issued under Title VI of the Civil Rights Act of 1964, Section 606 of Title VI of the Federal Property and Administrative Services Act of 1949, as amended, Section 504 of the Rehabilitation Act of 1973, as amended, Title IX of the Education Amendments of 1972, as amended, and Section 303 of the Age Discrimination Act of 1975.**
- (5) It or its representatives are not currently debarred, suspended, declared ineligible or otherwise excluded from receiving federal property.**

(B) THE DONEE AGREES TO THE FOLLOWING CONDITIONS:

- (1) All items of property shall be placed in use for the purpose(s) for which acquired within 1 year of receipt and shall be continued in use for such purpose(s) for 1 year from the date the property was placed in use. In the event the property is not placed in use, or continued in use, the donee shall immediately notify the State Agency and, at the donee's expense, return such property to the State Agency or otherwise make the property available for transfer or other disposal by the State Agency, provided the property is still usable as determined by the State Agency.**
- (2) Such special handling or use limitations as are imposed by GSA on any item(s) of property listed hereon.**
- (3) In the event the property is not so used or handled as required by (B)(1) and (2), title and right to the possession of such property shall, at the option of GSA, revert to the United States of America, and upon demand, the donee shall release such property to such person as GSA or its designee shall direct.**

(C) THE DONEE AGREES TO THE FOLLOWING CONDITIONS IMPOSED BY THE STATE AGENCY, APPLICABLE TO ITEMS WITH A UNIT ACQUISITION COST OF \$5,000 OR MORE AND PASSENGER MOTOR VEHICLES, REGARDLESS OF ACQUISITION COST, EXCEPT VESSELS 50 FEET OR MORE IN LENGTH AND AIRCRAFT, FOREIGN GIFTS OR OTHER ITEMS OF PROPERTY REQUIRING SPECIAL HANDLING OF USE LIMITATIONS, REGARDLESS OF THE ACQUISITION COST OR PURPOSE FOR WHICH ACQUIRED:

- (1) The property shall be used only for the purpose(s) for which acquired and for no other purpose(s).**
- (2) There shall be a period of restriction which will expire after such property has been used for the purpose(s) for which acquired for a period of at least one year, and to be in accordance with the provisions of the State Plan of Operation.**
- (3) In the event the property is not so used as required by (C)(1) and (2), and Federal restrictions (B)(1) and (2) and (G)(1) have expired, right to the possession of such property shall, at the option of the State Agency, revert to the State of South Carolina and the donee shall release the property to another eligible donee as the State Agency shall direct.**

(D) THE DONEE AGREES TO THE FOLLOWING TERMS, RESERVATIONS AND RESTRICTIONS:

- (1) From the date it receives the property listed hereon and through the period(s) of time the conditions imposed by this agreement remain in effect, the donee shall not sell, trade, lease, lend, bail, cannibalize, encumber or otherwise dispose of such property, or remove it permanently for use outside the State without the prior approval of GSA under (B) and (1) or the State Agency under (C) and (1). The proceeds from any sale, trade, lease, loan, bailment, encumbrance or other disposal of the property, when such action is authorized by GSA or by the State Agency, shall be remitted promptly by the donee to GSA or the State Agency, as the case may be.**
- (2) In the event any of the property listed hereon is sold, traded, leased, loaned, bailed, encumbered, cannibalized or otherwise disposed of by the donee from the date it receives the property through the period(s) of time the conditions imposed by this agreement remain in effect, without the prior approval of GSA or the State Agency, the donee, at the option of the State Agency**

shall pay to GSA or the State Agency, as the case may be, the proceeds of the disposal or the fair market value or the fair rental value of the property at the time of such disposal, as determined by GSA or the State Agency.

- (3) If at any time from the date it receives the property through the period(s) of the time conditions imposed by this agreement remain in effect, any of the property listed hereon is no longer suitable, usable or further needed by the donee for the purpose(s) for which acquired, the donee shall promptly notify the State Agency and shall, as directed by the State Agency, return the property to the State Agency, release the property to another donee or another State Agency, or to a department or agency of the United States, sell or otherwise dispose of the property. The proceeds from any sale shall be remitted promptly by the donee to the State Agency.
- (4) The donee shall make reports to the State Agency on the use, condition and location of the property listed hereon and on other pertinent matters as may be required from time to time by the State Agency.
- (5) At the option of the State Agency, the donee may abrogate the State conditions set forth in (C) and the State terms, reservations, restrictions and conditions pertinent therein in (D) by payment of an amount as determined by the State Agency.

(E) THE DONEE AGREES TO THE FOLLOWING CONDITIONS, APPLICABLE TO ALL ITEMS OF PROPERTY LISTED HEREON:

- (1) The property acquired by the donee is on an "as is, where is" basis, without warranty of any kind, and the Government of the United States of America will be held harmless from any or all debts, liabilities, judgments, costs, demands, suits, actions or claims of any nature arising from or incident to the donation of the property, its use or final disposition.
- (2) Where a donee carries insurance against damages to or loss of property due to fire or other hazards and where loss of or damage to donated property with unexpired terms, conditions, reservations or restrictions occurs, GSA or the State Agency, as the case may be, will be entitled to reimbursement from the donee out of the insurance proceeds of an amount equal to the unamortized portion of the fair market value of the damaged or destroyed donated items.

(F) THE DONEE AGREES TO THE FOLLOWING ADDITIONAL SPECIAL TERMS AND CONDITIONS APPLICABLE TO THE DONATION OF AIRCRAFT AND VESSELS (50 FEET OR MORE IN LENGTH) HAVING AN ACQUISITION COST OF \$5,000 OR MORE, AND FOREIGN GIFTS OR OTHER ITEMS OF PROPERTY REQUIRING SPECIAL HANDLING OR USE LIMITATIONS, REGARDLESS OF THE ACQUISITION COST OR PURPOSE FOR WHICH ACQUIRED:

- (1) The donation shall be subject to the additional special terms, conditions, reservations and restrictions set forth in the Conditional Transfer Document or other agreement by the authorized donee representative.

(G) THE DONEE AGREES TO THE FOLLOWING TERMS AND CONDITIONS IMPOSED BY THE STATE AGENCY APPLICABLE TO ITEMS WITH A UNIT ACQUISITION COST OF UNDER \$5,000:

- (1) As noted on the State Agency Distribution Document.

(H) ALL PROPERTY ACQUIRED THROUGH THE FEDERAL SURPLUS PROPERTY PROGRAM IS CONSIDERED FEDERAL FINANCIAL GRANT-IN-AID AND MAY REQUIRE COMPLIANCE UNDER THE SINGLE AUDIT ACT OF 1984 AND THE PROVISIONS OF OMB CIRCULARS A-133.

Signature of Chief Executive Officer

Date

**DO NOT WRITE IN THIS SPACE
FEDERAL /STATE SURPLUS PROPERTY APPLICATION DETERMINATION**

Application Approved _____

Application Disapproved _____

Date _____

Reason(s) for Disapproval:

Director _____